UNITED NATIONS

E

Economic and Social Council

Distr.
LIMITED

E/ICEF/1992/P/L.11
5 March 1992

ORIGINAL: ENGLISH

UNITED NATIONS CHILDREN'S FUND
Programme Committee
1992 session

FOR ACTION

COUNTRY PROGRAMME RECOMMENDATION*

Colombia

The Executive Director recommends that the Executive Board approve the country programme of Colombia for the period 1993-1997 in the amount of $6,050,000 from general resources, subject to the availability of funds, and $16,576,000 in supplementary funds, subject to the availability of specific-purpose contributions.

CONTENTS

	Page
THE SITUATION OF CHILDREN AND WOMEN	2
PROGRAMME COOPERATION, 1988-1992	4
RECOMMENDED PROGRAMME COOPERATION, 1993-1997	8

List of tables

1.	Basic statistics on children and women	15
2.	Expenditure under previous cooperation period, 1988-1992	17
3.	Planned expenditure, 1993-1997	18
4.	Staffing from budget and programme funds	19

* In order to meet documentation deadlines, the present document was prepared before aggregate financial data were finalized. Final adjustments, taking into account unspent balances of programme cooperation at the end of 1991, will be contained in the "Summary of 1992 recommendations for general resources and supplementary funding programmes" (E/ICEF/1992/P/L.2 and Add.1).

THE SITUATION OF CHILDREN AND WOMEN

1. Over the past year, Colombia has made major efforts to modernize and open its economy. The country aims to accelerate social development through a series of economic changes, constitutional reform and the implementation of processes to enhance peace and justice.

2. The ultimate goals of these efforts are to extend basic services to 40 per cent of Colombia's 33 million inhabitants and save over one fourth of the population from extreme poverty. Some major constraints the country faces in its social development efforts include drug-associated terrorism, the persistence of guerrilla attacks in strategic locations and an increase in common delinquency, all of which have negatively affected the social and economic situations of Colombia's children and youths, who account for 47 per cent of the total population.

3. Colombia's infant mortality rate (IMR) dropped from 74 per 1,000 live births in 1971 to 40 in 1990, but it is still high by Latin American standards. There are, however, significant differences within the country: IMR for the Pacific coast is 120 per 1,000 live births, whereas for Santa Fe de Bogotá it is 22 per 1,000 live births. The main causes of infant mortality are perinatal diseases, diarrhoeal diseases and respiratory infections.

4. Infant mortality and the incidence of vaccine-preventable diseases have decreased significantly owing to the strengthening of the regular health services, combined with immunization campaigns, which achieved the following coverage rates: tuberculosis, 95 per cent; combined diphtheria/pertussis/tetanus, 87 per cent; measles, 82 per cent; and poliomyelitis, 93 per cent. These government actions have been supported by UNICEF, Rotary International and the Pan American Health Organization (PAHO). Despite this encouraging trend, by April 1991, six cases of poliomyelitis had been identified on the Atlantic coast. A moderate decline has been reported in diarrhoeal and parasitic diseases (from 3.4 per cent in 1984 to 3.2 per cent in 1988), while the number of acute respiratory infections (ARI) rose from 4.8 per cent to 5.4 per cent in the same period. Accidents are the primary cause of mortality among children 5 to 14 years of age.

5. As a result of the cholera epidemic that hit Colombia in March, almost 6,000 cases were reported by the end of August 1991, 3,600 of which required hospitalization and 119 of which ended in death. A national committee for cholera surveillance was created, headed by the Minister of Health, with the participation of PAHO and UNICEF. As part of the national plan for cholera control, a house-to-house "sanitation mop-up" operation was conducted in high-risk areas. More than 500,000 houses were visited. A second round is currently under way.

6. The first case of acquired immune deficiency syndrome (AIDS) was reported in 1983 and by 1991, 1,742 cases of the disease had been identified, 126 of which were in women, 8 in children under 1 year of age, 14 in children between 1 and 9 years old, 4 in children between 10 and 14 years of age, and 41 in

adolescents between 15 and 19 years of age. Some 761 deaths were reported for 1991. Government interventions have concentrated on mass education, research, blood-bank control and capacity-building.

7. The status of child nutrition in the country has improved in the last decade, but 13 per cent of children under five years of age still show signs of malnutrition. Chronic malnutrition is present in 20 per cent of children, principally among poor families with uneducated mothers. The incidence of low birth weight reached 9 per cent in the five major cities of the country. The Instituto Colombiano de Bienestar Familiar (ICBF) (Colombian Institute of Family Welfare) provides supplementary feeding to nearly 1 million children under seven years of age through a network of 50,000 community child-care homes and more than 1,000 pre-school centres. This represents only 47 per cent of children between two and seven years of age and 42 per cent of children under two years of age.

8. Pre-school enrolment is low for poor children and benefits less than 400,000 children in the country, most of whom attend private-sector schools. Approximately 80 per cent of children six years of age enter the first grade; however, there is a repetition rate of 20 per cent and a drop-out rate of 15 per cent, mainly owing to the poor quality of teaching and insufficient classroom facilities. The shortage of school facilities is higher in the municipalities on the Pacific and Atlantic coasts, as well as in the Amazon region. Regional disparities also exist in the rates of enrolment for school-age children. The rate of enrolment in cities is 87 per cent, while in the rural areas it is 80 per cent. Although there are no significant differences in the access of girls and boys to primary education, there are gender differences in the pedagogical approaches and educational materials, which tend to reinforce gender stereotypes.

9. Child abuse affects children from all social and economic strata, and has serious repercussions on adulthood. According to ICBF, there are approximately 100,000 cases of child abuse every year. ICBF has estimated that there are 20,000 abandoned children, 5,000 street children and 26,000 institutionalized children. The number of children who are either victims or perpetrators of acts of violence has increased alarmingly. There are a substantial number of unidentified children in areas of armed conflict and 2 million children between 7 and 14 years of age without the most basic services.

10. Child employment has increased in the country owing to unequal distribution of income and inefficiency in the educational system. ICBF estimates that there are close to 800,000 working children between 12 and 17 years of age who perform low-level jobs, receive low wages, work longer hours and lack formal employment benefits. It has been estimated that in 1988, some 16 per cent of the children under nine years of age living in rural areas performed jobs outside of the household.

11. Colombia's indigenous population accounts for 1.5 per cent of the total population. Although there are laws that safeguard the rights of indigenous communities, in practice, the models introduced by outside institutions are usually imposed upon these people and clash with their organizational and economic systems. Little information is available on the situation of indigenous children. The only available studies indicate that, in 1990, IMR among indigenous people in the Cauca region was 44 per 1,000 live births, in contrast with 36 per 1,000 live births for the whole region. Through the subregional programme for sustainable development for children in the Amazon basin, a situation analysis is being conducted to help guide future actions in favour of indigenous children in the Amazon region.

12. The role of women in Colombia has changed dramatically. As the number of households headed by women has increased, family structures have also changed, especially among the poor. The number of families headed by women has increased by 25 per cent. Economic conditions in indigent households headed by women are precarious, and their income levels are the lowest among the poor. Between 1976 and 1989, the working population increased by 59 per cent for men and 83 per cent for women. It is assumed that the increasing supply of female labour has been absorbed by the growing informal sector. The bulk of structural unemployment in Colombia is attributable to women in the 25- to 30-year age group who have not completed secondary education and who are seeking full-time jobs. In 1990, the average female income was 32 per cent lower than that of males. Women in rural areas who are heads of households own less land, control smaller plots and lack access to credit and technical assistance.

13. Women of child-bearing age account for one fourth of the total population and represent half of the female population. The country's total fertility rate decreased to 2.9 children per woman. The percentage of pregnant women immunized against tetanus increased to 85 per cent in 1991. Although maternal mortality attributable to birth-related complications dropped to 100 per 100,000 live births in 1990, complications related to pregnancy or abortion are still the main cause of hospitalization for women between 15 and 44 years of age.

PROGRAMME COOPERATION, 1988-1992

14. UNICEF cooperation in this ongoing programme has focused on child survival, universalization of primary education (through the "new school" approach), home day-care centres, training and organization for peasant women, social mobilization and support for social policy formulation, and the provision of basic services for the Pacific coast, Bucaramanga and Santa Fe de Bogotá.

15. The programmes for child survival, home day-care centres and the "new school" constituted part of the social policies of the Government to reduce poverty. The programme for social mobilization contributed to the

dissemination of the Convention on the Rights of the Child and its integration into the new constitution.

Child survival

16. The national child survival programme, Supervivir, has contributed to the increase of vaccination coverage to a national average of 80 per cent in 1990 for the main antigens - combined diphtheria/pertussis/tetanus, anti-tuberculosis, poliomyelitis and measles vaccines. The programme has been implemented in all of the departments of the country and a network of about 400,000 health agents, most of whom are high-school students, has been established. Significant progress has also been achieved in social mobilization, intersectoral and community participation and the establishment of community oral rehydration units and community care units for ARI, as well as in the promotion of breast-feeding and appropriate child-rearing practices.

Home day-care centres

17. The Government of Colombia has made very good efforts to enhance child development for children under seven years of age. Through the home day-care programme, 1 million children between two and seven years of age receive supplementary feeding and pre-school education. As a result of the mid-term programme review, provisions have been made to strengthen the training of mothers and education agents in the community and to improve health care for children and coordination between the health and education sectors. Early stimulation activities are also being undertaken for children under two years of age, as well as training for lactating mothers and pregnant women. The collection and processing of information has been systematized for more efficient programme monitoring and evaluation. With the cooperation of the World Bank, an evaluation of the programme is under way.

Universalization of primary education

18. The Government of Colombia has achieved significant results in the coverage and improvement in the quality of rural primary education by using the "new school" methodology. More than 1 million children in 20,000 schools attend classes that use the "new school" approach. UNICEF has contributed to the training of 40,000 teachers and to the production of education materials. According to the preliminary results of an evaluation undertaken with UNICEF support, there is a need to improve training and to strengthen regional training teams, learning centres and work-study groups for teachers. The "new school" methodology is being promoted in other countries to assist in the achievement of universal primary education. The Government has officially adopted the "new school" approach as the curriculum for rural areas and is planning to introduce it in the urban areas.

Basic social services

19. UNICEF has supported the provision of basic services in the cities of Bucaramanga and Santa Fe de Bogotá and in the Pacific coast.

20. In Bucaramanga, the basic services programme has been implemented following an innovative methodology that combines the integrated and simultaneous provision of basic services with community participation and intersectoral coordination. More than 160,000 inhabitants living in 85 neighbourhoods have benefited.

21. In Santa Fe de Bogotá, the programme, launched in 1988, encountered difficulties in its initial phase of implementation and had to be reformulated in 1990. To accelerate the rate of implementation, an agreement was signed between UNICEF, the Office of the Mayor of Santa Fe de Bogotá and two non-governmental organizations (NGOs), which will provide technical support for the planning and monitoring of basic services to reach nearly 600,000 people living in the poorest areas of the city.

22. The basic services programme for the Pacific coast has achieved significant coverage in the fields of health, education and pre-school education for children under seven years of age. Nearly 100,000 children have been immunized. Some 700 schools are operating with the "new school" methodology and more than 1,400 teachers have been trained. UNICEF has supported the production of educational materials and the broadcasting of educational radio programmes for the adult literacy programme. The experience gained in the Pacific coast with the implementation of the "new school" methodology and the child-care programme has been used to expand these activities to the national level.

23. The basic services programme is in the process of consolidation. In Bucaramanga, the Office of the Mayor, the Corporación de Defensa de la Meseta de Bucaramanga (Corporation for Defence of the Bucaramanga Plateau) and the city's health institute have made budgetary allocations for the expansion and development of the programme. In Santa Fe de Bogotá, the district council has adopted the programme as part of the city development plan. Although the Plan de Desarrollo Integral de la Costa Pacífica (Integral Development Plan for the Pacific Coast) has adopted the basic services methodology for the provision of basic services, the integration of the services could not be achieved owing to geographic and coordination obstacles. To overcome this constraint, the mayors' offices in this region are promoting local planning and the creation of community coordinating institutions.

Promotion of women's development

24. The programme for the promotion of women's development focused on employment generation, organization and training in child development. Three pilot projects were developed at the departmental level, and support was provided to implement national policies, identify technologies to improve households and increase access to loans for peasant women. Support has also been provided for the creation of "women's offices" in several municipalities.

Children in especially difficult circumstances

25. UNICEF supported demonstration experiences that combine treatment with prevention at the community level, as well as a situation analysis of children in especially difficult circumstances. Support was also provided for the Preventive Movement for Youths and Children at High-Risk, which brings together 270 local government agencies and NGOs, under the coordination of the Consejo Nacional de la Niñez, Adolescencia y Juventud (National Council for Childhood, Adolescence and Youth). The Presidential Office for Youths, Women and the Family, with UNICEF cooperation, is developing a youth policy and has implemented two demonstration experiences for youths and children in especially difficult circumstances at Valle del Cauca and Cali, in coordination with NGOs and the community.

Community for children and women

26. UNICEF supported the creation of a Social Communications Office at the Ministry of Communications, which is the coordinating body for educational communications directed at children and women. Support was provided for the design and execution of a campaign on the rights of the child using a combination of radio, television and the print media, along with the participation of the public and private sectors. The main goals of the campaign were to create awareness about the problems of children and to promote the Convention on the Rights of the Child. More than 40,000 educational charts on the rights of the child were distributed among teachers and students as part of the campaign. Although the campaign produced significant actions to benefit children, the Government still lacks a communication strategy to support programmes for women and youths.

Lessons learned

27. A key lesson learned has been the importance of strengthening the delivery capacity of programmes related to maternal and child health, child development, basic education, children in especially difficult circumstances and women's development. It was also learned that, in order to maximize the impact of UNICEF cooperation, it will be necessary: (a) to develop models of intervention at municipal, regional and national levels for the correct application of national policies; (b) to improve programme coordination and decentralize programme monitoring and follow-up systems; (c) to develop impact indicators; and (d) to reinforce communications strategies to create a culture in favour of children and women.

RECOMMENDED PROGRAMME COOPERATION, 1993-1997

Recommended general resources: $ 6,050,000
Supplementary funding: $16,576,000

Recommended programme cooperation a/

(In thousands of United States dollars)

	General resources	Supplementary funds b/	Total
Health	1 210	2 839	4 049
Child development	1 000	3 192	4 192
Basic education	800	2 315	3 115
Women in development	-	1 819	1 819
Children in especially difficult circumstances	-	2 082	2 082
Communication for children and women	482	367	849
Advocacy and planning	121	1 519	1 640
Basic social services	670	2 443	3 113
Programme support	1 767	-	1 767
Total	6 050	16 576	22 626

a/ The breakdown for estimated yearly expenditures is given in table 3.

b/ In addition, there are also funded supplementary funding projects shown in table 3.

The national programme of action

28. The Government of Colombia has prepared a national programme of action to implement the goals of the World Summit for Children and to accelerate implementation of the Convention on the Rights of the Child. The programme of action approved by the Colombian National Council on Economic and Social Policy ensures the continuity and sustainability of the proposed lines of action to achieve the national goals. The main goals of the national programme of action are as follows:

	1990	1997	2000
1. Infant mortality rate (per 1,000 live births)	40	28	25
Under-five mortality rate (per 1,000 live births)	50	35	31
2. Maternal mortality rate (per 100,000 live births)	110	77	55
3. Malnutrition			
- Under-five malnutrition (percentage)	13	8	6
4. Water			
- Access to safe drinking water (percentage)	92	97	100
5. Sanitation			
- Access to sanitary means of excreta disposal (percentage)	52	59	100
6. Basic education			
- Enrolment ratio at primary level	84	92	100
- Grade one enrolment completing primary school	59	72	80
7. Adult literacy rate (percentage)	90	93	95

29. The UNICEF programme of cooperation has been prepared in line with the national programme of action. The preparation of the country programme involved a careful analysis of government policies and priorities, national goals, the situation of children and women, as well as the results of evaluations of past cooperation. The Government has agreed that UNICEF should make a special effort to support the formulation and consolidation of policies for the integrated development of children, youth and women.

30. The Government of Colombia has requested UNICEF to support the following national objectives: (a) to reduce infant and child mortality; (b) to reduce malnutrition; (c) to implement the national policy on child development; (d) to achieve universal basic education; (e) to improve access to water

supply and sanitation; (f) to provide special services for children in especially difficult circumstances; and (g) to guarantee equal rights for girls and women. The Government has also requested support for the design of appropriate methodologies for the provision of basic services in remote and poor areas of the country, and to contribute to the development of the national programme of action.

31. The country programme of cooperation comprises national programmes in the areas of health, child development, basic education, women in development, children in especially difficult circumstances, communication for children and women, advocacy and planning for social policies, as well as area-based programmes for the provision of basic services at the regional level. Cooperation strategy will focus on the Convention on the Rights of the Child, the commitments assumed by Colombia at the World Summit for Children and the national programme of action. The strategy will emphasize human development, highlighting the importance of integrated child development programmes in the process of all social development efforts. This, in turn, will foster social communication, new alliances and the decentralization of financial resources.

Health

32. The proposed programme is divided into six projects: the promotion of primary health care (PHC); immunization; control of diarrhoeal diseases (CDD); reduction of maternal and child malnutrition; control of ARI; and the prevention of AIDS. The target population for the first five projects will be nearly 2 million children under five years of age.

33. The programme aims to improve the health of mothers and children and to control vaccine-preventable diseases through promotional and preventive actions. The specific objectives are: (a) to reduce maternal and perinatal mortality and to promote breast-feeding and the "baby-friendly" hospital initiative; (b) to reduce under-five mortality and morbidity caused by CDD, ARI, vaccine-preventable diseases and accidents; and (c) to reduce low birth weight and malnutrition in children under five years of age. The strategy of cooperation will focus on municipal and state health departments, which will be supported through technical assistance in programme development, management and personnel training.

34. UNICEF will cooperate with the Ministry of Health to extend health services to 800,000 women; to strengthen the capacity of 38 health agencies; and to train 3,100 health teams and 3,000 midwives in aspects of maternal and perinatal care. The immunization project will strive to attain universal immunization for poliomyelitis and the consequent eradication of the disease; to train government officials from 20 regional health offices in monitoring and the production of educational material; and to strengthen the cold chain. To reduce child and maternal malnutrition, UNICEF will support the training of 10,000 nurses' aides on the use of growth charts, the production of educational material for health personnel and the community, and the control of anaemia. Support will also be provided to promote "baby-friendly" hospitals and breast-feeding. This project will be implemented in

coordination with income-generating activities for women. For CDD, UNICEF will support the production of packets of oral rehydration salts and the training of 7,000 health promoters and 10,000 volunteers working in the oral rehydration units. Logistical support will also be provided for these units. To reduce ARI, support will be provided to train 7,000 health promoters on aspects related to the causes, prevention and treatment of ARI. UNICEF will also contribute to the production of educational material for the prevention of AIDS.

Child development

35. UNICEF will support the Government in defining and implementing a national policy for child development, leading to universal child-care coverage and the identification of new child-care modalities to meet the needs of children and their families. More specifically, the programme seeks to support the development of actions to improve the health and nutrition of children under seven years of age; to prevent child abuse, abandonment and exploitation; to disseminate and enforce the Code for Minors; to support the design and implementation of strategies to provide mass education for parents and the community; and to promote the organization of parents' associations for the defence of the rights of the child.

36. Building on past experience, UNICEF will contribute to the expansion of the child-care community home programme to reach 1 million children between two and six years of age, some 600,000 children under two years of age and some 400,000 pregnant women. The programme will also train 20,000 "new school" teachers on aspects related to child survival and development. Advocacy and social mobilization will be used at all levels to enhance the participation of all sectors of the society, especially that of private institutions.

Basic education

37. The main lines of action of this programme are the universalization of basic education and literacy for women and girls. The basic education programme aims to increase primary school enrolment in urban and rural areas, and to improve the quality of education as a means to retain a higher number of children and youth. Actions to be supported include expanded coverage of the pre-school programme to 630,000 children by 1994, and the training of 20,000 rural "new school" teachers and 23,000 first-grade teachers in new teaching methodologies for reading, writing and mathematics. The programme will also train teachers in rural areas in the "new school" methodology and consolidate and disseminate information on the "new school" concept in the marginal urban areas of 20 per cent of the municipalities.

38. UNICEF will support changes in school curricula and other education material when it is discriminatory and distorts the values of men and women. Emphasis will be placed on improving literacy among women and reducing existing disparities between boys and girls in the process of socialization at

family, school and community levels. Support will be provided: (a) to design a five-year plan to improve literacy and increase the retention of girls in schools; (b) to provide training for public officials of the Ministry of Education and community leaders in order to create a more positive attitude towards women's literacy programmes; and (c) to support the production of educational material based on the contents of Facts for Life.

Children in especially difficult circumstances

39. The line of action in this sector encompasses two areas: children in especially difficult circumstances; and support for the organization and development of youth. The objectives of the programme are: (a) to strengthen the Central Youth Policy Coordinating Units; and (b) to support youth development through the provision of health care and basic education, as well as through the creation of employment opportunities and the organization of the youth. Responding to government priorities established in the country's new constitution and through the adoption of the Convention on the Rights of the Child, the programme will also seek to improve the quality of life for children in especially difficult circumstances by reducing or eliminating abuse, abandonment and exploitation of working children, street children, institutionalized children and those in situations of armed conflict. The programme will contribute to the development of a support system for children and youth in especially difficult circumstances. In addition, support will be provided for the development of intervention models at municipal, departmental and regional levels aimed at providing integrated health care, education and recreation, as well as appropriate emotional support for children in especially difficult circumstances.

40. Public awareness and advocacy campaigns will be promoted through mass media, with the support of the Ministry of Communication, to sensitize the public to the problems and needs of children in especially difficult circumstances and youths. UNICEF will support the establishment of a national support system for children in especially difficult circumstances in coordination with ICBF, and the setting up of a data-gathering system. Support will also be provided to develop new methodologies and modalities of intervention to be replicated in different areas of the country.

Women in development

41. The programme's main goal is to strengthen policy coordination for women and to structure, evaluate and disseminate five intervention models. More specifically, the programme is intended to design and set up a system to monitor the situation of women; to support the creation of mechanisms for policy application; to support appraisal of women's remunerated and non-remunerated work; to improve health, nutrition and education; to influence the content of formal education in order to avoid inequalities in images and the status of men and women; and to provide work-related and technical training for women. UNICEF will support the provision of health care for 450,000 adolescents aged 10 to 19 years and for 363,000 adult women.

Advocacy and planning

42. This programme will aim: (a) to contribute to the implementation of the national programme of action at national and local levels through the application of an equitable social expenditure strategy; and (b) to strengthen the decentralization processes and reinforce the State's capacity to design, formulate, execute and evaluate social policies. The programme will focus on the poorest groups, strengthening the capacity of social institutions and developing an information-gathering system on poverty and social impact indicators at national, regional and local levels. Activities will include follow-up on water improvement programmes, which are a component of the present administration's policies; supporting innovative experiences related to the reinforcement of municipal and community administration; supporting training for municipal administrators and community leaders; and disseminating the achievements of social policy in general, and advancements towards national goals.

43. UNICEF will continue to support the Oficina Nacional de Planificación (National Planning Office) in the development of a national indicator system to monitor the situation of children and women. UNICEF will also support the evaluation of the home day-care centres programme and the "new school" programme.

44. UNICEF will support the design and development of information mechanisms directed to mayors, governors, members of congress, the private sector and the media in order to promote the rights of children, women and youth and to organize educational activities for parents, children, women and youth. Proposed actions include putting the rights of the child on the agenda of political parties; organizing communication committees for children, youth and women; and designating communication strategies to promote the basic services programmes. To support the attainment of national goals, the programme will strive to create and sustain momentum in favour of social development through social mobilization, the use of national and regional media, local development and inter-institutional coordination.

Basic social services programmes

45. Experiences gathered from the Bucaramanga, Pacific coast and Santa Fe de Bogotá basic services programmes have demonstrated the importance of the basic services programme methodology in improving efficiency in the provision of services through the coordination of resources and efforts, with active community preparation in decision-making.

46. The country's present context of political and administrative decentralization and the commensurate increase in the responsibility of municipalities to develop programmes to meet basic needs increases the need to implement a methodology such as the one used in the basic services programme.

47. With community participation, UNICEF will support the development of basic services models at regional and municipal levels that address needs in the areas of PHC, basic education, sanitation and income generation. The programme will coordinate efforts in the poorest parts of the country, namely, the Pacific coast, the Atlantic coast, the Amazon basin and the department of Valle del Cauca. The programme will continue its activities in Santa Fe de Bogotá and will be extended to include Medellín. Approximately 3 million people living in poverty will benefit.

Cooperation with United Nations agencies

48. Cooperation with agencies of the United Nations system and bilateral cooperation sources is considered essential for the attainment of the country programme goals. UNICEF will coordinate actions with PAHO, Rotary International and the United States Agency for International Development (USAID) on matters related to universal child immunization. UNICEF will join efforts with PAHO to control cholera, reduce ARI and improve maternal health. The nutrition surveillance system will continue to be implemented with the cooperation of the Food and Agriculture Organization of the United Nations (FAO). The United Nations Development Programme (UNDP) and UNICEF will cooperate to develop a human development project with the participation of the Fundación para la Educación Superior y el Desarrollo (Foundation for Higher Education and Development), a private Colombian institution. UNICEF will also work with the United Nations Population Fund (UNFPA) to improve maternal health. Other joint activities will be carried out with the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Bank and the Inter-American Development Bank.

TABLE 1. BASIC STATISTICS ON CHILDREN AND WOMEN

Colombia (1990 and earlier years) UNICEF country classification

Under-five mortality rate	50	(1990)	Middle U5MR
Infant mortality rate	39	(1990)	Middle IMR
GNP per capita	$ 1240	/1990)	Lower-middle GNP
Total population	33.0 Million	(1990)	

KEY INDICATORS FOR CHILD SURVIVAL AND DEVELOPMENT		1970	1980	1985	1990
Births	(thousands)	752	836	835	878
Infant deaths (under 1)	(thousands)	59	42	34	34
Under-five deaths	(thousands)	88	54	60	44
Under-five mortality rate (per 1,000 live births)		117	65	72	50
Infant mortality rate (under 1) (per 1,000 live births)		78	50	41	39

		About 1980	Most recent
Underweight children (under 5) (% weight for age, 1980/1987)	Moderate & severe	..	10
	Severe	..	2
Babies with low birth weight (%, 1979/1986)		10	8*
% of primary school children reaching final grade (1980/1986)		..	57

NUTRITION INDICATORS		About 1980	Most recent
Mothers breast-feeding at 3/6/12 months (%, 1976/1986)		70 / 5[illegible] / 39	80/ 56/ 36
Prevalence of wasting (%, 1980/1985)		10	5
Prevalence of stunting (%, 1980/1985)		28	18
Daily per capita calorie supply (% of requirements, 1979-1981/1988)		108	110
Food production per capita index (Index 1979-1981=100, 1980/1990)		99	111
Household expenditure (% of total income, 1980-1985)	All food/cereals		29/ ..

HEALTH INDICATORS		About 1980	Most recent
ORT use rate (%, 1988-1989)			40
Access to health services	Total	..	60
(% of population, 1980/1985)	Urban/rural	../..	../..
Access to safe water	Total	63*	88
(% of population, 1980/1988)	Urban/rural	89*/ 16*	88/ 87
Access to adequate sanitation	Total	61	70
(% of population, 1980/1985)	Urban/rural	93/ 4	96/ 13
Births attended by trained personnel (%, 1986-1990)		..	71
Maternal mortality rate (per 100,000 live births, 1979/1987)		..	200

Immunization		1981	1985	1990
One-year-olds (%) immunized against:	Tuberculosis	57	76	95
	DPT	20	61	87
	Polio	22	62	93
	Measles	26	53	82
Pregnant women (%) immunized against	Tetanus	6	..	22

TABLE 1 (continued)

Colombia

EDUCATION INDICATORS		About 1980	Most recent
Primary enrolment ratio (gross/net)	Total	128/ ..	114/ 73
(%, 1980/1986)	Male	127/ ..	112/ 72
	Female	130/ ..	115/ 74
Secondary enrolment ratio (gross/net)	Total	44/ ..	56/ ..
(%, 1980/1986)	Male	43/ ..	55/ ..
	Female	45/ ..	56/ ..
Adult literacy rate, 15 years & older	Total	78	87
(%, 1970/1990)	Male/female	79/ 76	88/ 86
Radio/television sets			
(per 1,000 population, 1980/1988)		128/87	170/110

DEMOGRAPHIC INDICATORS		1970	1980	1985	1990	2000**
Total population	(Million)	21.4	26.9	29.9	33.0	39.4
Population aged 0-15 years	(Million)	..	10.8	12.0	12.6	13.5
Population aged 0-4 years	(Thousands)	..	3621.2	3957.8	4124.8	4370.8
Urban population (% of total)		57	64	67	70	75
Life expectancy at birth	Total	61	66	68	69	71
(years)	Male	59	63	65	66	68
	Female	63	68	71	72	74
Total fertility rate		5.5	3.8	3.3	3.0	2.7
Crude birth rate (per 1,000 population)		38	31	28	27	23
Crude death rate (per 1,000 population)		9	7	6	6	6

		About 1980	Most recent
Contraceptive prevalence rate		51	65
(%, 1980/1986)			
Population annual growth rate	Total	2.2	2.0
(%, 1965-1980/1980-1990)	Urban	3.5	2.9

ECONOMIC INDICATORS		About 1980	Most recent
GNP per capita annual growth rate		3.7	1.1
(%, 1965-1980/1980-90)			
Inflation rate (%, 1965-1980/1980-1989)		17	24
Population in absolute poverty	Urban/rural	34 /..	32*/ 70*
(%, 1977/1985)			
Household income share	Top 20%/bottom 40%	59 / 11	53*/ 13*
(%, 1975/1988)			
Government expenditure	Health/education	.. / ..	.. / ..
(% of total expenditure, 1980/1989)	Defence	..	..
Household expenditure	Health/education		7 / 5
(% of total income, 1980-1985)			
Official development assistance:	US$ millions	90	62
(1980/1989)	As % of GNP	0	..
Debt service			
(% of goods & services exports, 1980/1989)		9	38

Definitions, sources and symbols are described in the section preceding these data sheets.

* UNICEF field office source.

** United Nations Population Division projections based on past and current trends.

TABLE 2. EXPENDITURE UNDER PREVIOUS COOPERATION PERIOD, 1988-1992 a/

(In thousands of United States dollars)

COUNTRY: COLOMBIA
LATEST BOARD APPROVAL: 1988
GENERAL RESOURCES: $6,168,000

	Supplies and equipment (incl. freight)		Training grants		Project staff		Other cash		Totals		
	GR	FSF	GR	FSF	GR	FSF	GR	FSF	GR	FSF	Total
Health	165	146	276	227	43	70	1084	565	1568	1008	2576
Water supply and sanitation	7		18				47	31	72	31	103
Nutrition		103								103	103
Education	5		225	79		46	401	88	631	213	844
Community organization and development	147	55	214	197	4	43	700	885	1065	1180	2245
Young child development	55	39	129		6		86	35	276	74	350
Women-centred programme		2	40	29	13		147	153	200	184	384
Children in especially difficult circumstances		1		60		12		54		127	127
Advocacy	54		36				397	11	487	11	498
Emergency								69		69	69
Planning and project support	56	3	35		472	40	618	59	1181	102	1283
Freight	16	7							16	7	23
GRAND TOTAL	505	356	973	592	538	211	3480	1950	5496	3109	8605

GR = General resources.
FSF = Funded supplementary funding.
a/ The current programme cycle covers period 1988-1992, but actual expenditure figures are only available through 1991.

TABLE 3. PLANNED EXPENDITURE, 1993-1997

(In thousands of United States dollars)

Country: COLOMBIA Period covered: 1993-1997	Funding status	1993	1994	1995	1996	1997	Total
Health	GR	242	242	242	242	242	1210
	NSF	633	691	618	594	303	2839
Education	GR	160	160	160	160	160	800
	USF(R)	102					102
	NSF	700	482	408	473	252	2315
Young child development	GR	200	200	200	200	200	1000
	NSF	796	722	719	570	385	3192
Women-centred programme	USF(R)	106					106
	NSF	450	500	370	277	222	1819
Children in especially difficult circumstances	NSF	560	410	374	373	365	2082
Communication for children and women	GR	100	100	100	100	82	482
	NSF	150	100	80	37		367
Planning and social statistics	GR	25	20	20	14	42	121
	NSF	377	365	165	231	381	1519
Programme support	GR	349	354	354	360	350	1767
Intergrated area-based programmes	GR	134	134	134	134	134	670
	USF(R)	206					206
	NSF	609	571	499	432	332	2443
TOTAL	GR	1210	1210	1210	1210	1210	6050
	USF(R)	414					414
	NSF	4275	3841	3233	2987	2240	16576
GRAND TOTAL		5899	5051	4443	4197	3450	23040

GR = General resources.
NSF = New supplementary funding.
USF(R) = Unfunded supplementary funding subregional.

TABLE 4. STAFFING FROM BUDGET AND PROGRAMME FUNDS

COUNTRY: COLOMBIA	Number of posts	Amount (Thousands of United States dollars)
FINANCED FROM 1992-1993 APPROVED BUDGET:		
International Professional established posts	2	478
Local national Professional and General Service established posts	12	619
Operating costs		446
Total	14	1543
FINANCED FROM PROGRAMME FUNDS: a/		
International Professional project posts		
General resources	2	429
Supplementary funds		
Local national Professional and General Service project posts		
General resources	16	966
Supplementary funds	1	150
Total	19	1545

a/ For information source, see the 1992 revised post authorization table, dated 23 July 1991.